



VOLUNTEER APPLICATION

Name: _____ Date: _____

Address: _____

Street City State Zip
Home Phone: _____ Alt Phone: _____

E-Mail Address: _____ DOB: _____

Emergency Contact: _____ Phone: _____

The minimum age to volunteer is 10. A trained, qualified adult must accompany volunteers between the ages of 10 and 14. Volunteers 15 years and over must demonstrate the ability to work unsupervised after training.

When are you available? (Check the boxes that suit your schedule.)

	Sun	Mon	Tue	Wed	Thu	Fri	Sat
Morning							
Afternoon							
Evening	X	X	X			X	X

List any special skill you have that would be valuable to the shelter:

Why are you interested in becoming a volunteer?

What types of pets do you currently own?

Please circle the animals you are comfortable handling and working with:

☐ Dog

☐ Cat

☐ Rabbits

☐ Birds

☐ Small Mammals

☐ Reptiles

☐ Other _____

Have you ever received a rabies pre-exposure vaccine? YES NO

Are you interested in providing foster care for shelter animals? YES NO

Have you ever been convicted of a crime? YES NO

If "Yes" please explain:_____

Signature:_____ Date:_____

Print:_____

WAIVER OF LIABILITY

I, as a volunteer service provider to Frederick County Animal Control, hereby knowingly, freely and voluntarily waive all claims for injuries, losses, combinations thereof, and/or demands of any incident arising as a result of such activity on or off the premises, from which any liability may or could occur against the Frederick County Government and Frederick County Animal Control or its agents or employees jointly or individually. I declare that I shall not hold the Frederick County Animal Control liable for any illness, injury or disease I might contract or sustain while I am working in said capacity. I also understand that I am not covered under Workman's Compensation.

I fully recognize the possible dangers associated with the work of the Frederick County Animal Control, and I freely consent to this waiver. Frederick County Animal Control makes no representations concerning any animal's exposure to rabies or other diseases.

I further understand that the use of alcoholic beverages or controlled dangerous substances will not be allowed on or off the premises while serving in a volunteer capacity for Frederick County Animal Control.

Signed: _____ Date: _____

Print:_____

Parent/Guardian: _____
(If under eighteen years of age)

All volunteers MUST attend an orientation. Please contact the Volunteer Coordinator for the date of the next orientation. For questions about the volunteer program, please call 301-600-1319.